

City of Hollister Redevelopment Agency

Hollister Second Downpayment Assistance Program (HSP)

Instructions to Applicants

All the below information must be completed at time of submittal or the package will be deemed **“incomplete”**. The following items must be completed and returned to the City of Hollister Redevelopment Agency, 550 Monterey Street, Hollister, CA. 95023

1. Complete and sign the Hollister Second Program (HSP) application.
2. Please include the following applicant documentation with your HSP application:
 - * 2 Most Recent Pay Stubs Showing Year-To-Date Gross Income
 - * W-2's from the previous two years
 - * 2 most recent bank statements and/or 401k statement
 - * Complete Tax Returns from the previous three years
 - * Any additional information establishing total household income
3. Complete the Hollister Second Program (HSP) General Information questionnaire.
4. Signed Credit Report Authorization, Fair Lending Notice, Privacy Act Notice, Loan Terms and Features and Release of Information Notice.
5. Please include the following lender documentation with your application:
 - * Pre-Approval Letter
 - * Mortgage Application Form 1003
 - * Mortgage Form 1008
 - * Good Faith Estimate (GFE)
 - * Credit Report
6. Letter of written request for funds from the City of Hollister.
7. Fully Executed Purchase Agreement (if applicable) please remember to make offers contingent upon receiving Hollister Second Funds.

For additional Information call Christopher “C.J.” Valenzuela at 831 636-4316 x 14.



Applicant(s): _____
Lender/Broker: _____

HOLLISTER SECOND DOWNPAYMENT ASSISTANCE PROGRAM (HSP)

APPLICATION CHECK LIST

- _____ Applicant met with Agency Staff
- _____ HSP Funds Request Letter
- _____ Copy of Fully Executed Purchase Agreement
- _____ Complete and Sign HSP Application
- _____ Pre-Approval Letter, Mortgage Application Form 1003, Mortgage Form 1008, Good Faith Estimate (GFE) and Credit Report
- _____ 2 Most Recent Pay Stubs Showing Year-To-Date Gross Income
- _____ W-2's from Previous Two (2) Years
- _____ Complete Tax Returns from Previous Three (3) Years
- _____ 2 Most Recent Bank Statements/401k Statement for Verification of Funds
3.0% contribution (Deposit)
- _____ Complete and Sign all Disclosures

**For more information, please call the City of Hollister Redevelopment Housing
Coordinator, Christopher "C.J." Valenzuela at 831 636-4316 x 14**



EQUAL
HOUSING
OPPORTUNITY

City of Hollister Redevelopment Agency

Application for the Hollister Second Downpayment Assistance Program

LOAN PROCESSOR _____ DATE RECEIVED _____ File # _____

NOTE: READ "CERTIFICATION" ON LAST PAGE BEFORE FILLING OUT APPLICATION

Applicant's Name _____ Social Security# _____
Co-Applicant's Name _____ Social Security# _____
Street Address _____
City _____ Zip _____
Mailing Address _____
County _____
Phone _____ Work or other contact: (_____) _____
E-Mail Address _____

For statistical/government monitoring purposes only: Enter code from list below (voluntary)

Applicant's race* _____ Co-applicant's race* _____

***Race of Household Codes:**

11-White 12-Black/African American 13-Asian 14-American Indian/Alaskan 15-Native Hawaiian/other Pacific Islander 16-American Indian/Alaskan Native & White 17-Asian & White 18-Black/African American & White 19-American Indian/Alaskan Native & Black/African American 20-Other Multi-Racial

Hispanic: Yes _____ No _____

Please list your address(es) for the last three years, starting with the most recent:

MO./YR. -- MO./YR. ADDRESS _____

1) _____

2) _____

3) _____

Has any of the applicants held ownership or interest in a property in the last three years?

Yes _____ No _____ If yes, please explain:

INCOME: Check applicable sources of income currently and during the prior calendar year for any residents:

Wages _____	AFDC(TANF) _____	Interest _____	Other _____
SSA _____	Disability _____	Rentals _____	explain
SSI _____	Unemployment _____	Pension _____	

STAFF USE ONLY BELOW THIS LINE

Total persons who will live at address	_____	In Target Area?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Total seniors in household	_____	Conflict of Interest?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Annual Family Income	_____	Handicapped:	<input type="checkbox"/> No <input type="checkbox"/> Yes
Previous Year's Income	\$ _____	FHOH?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Projected Income	\$ _____	Farm worker?	<input type="checkbox"/> No <input type="checkbox"/> Yes
<p>HCD Definition (Circle)</p> <p>LI VLI XLI</p>			

FAMILY AND INCOME DETAILS

LIST ALL PERSONS WHO WILL BE LIVING IN THE PROPERTY BEING PURCHASED INCLUDING APPLICANT AND CO-APPLICANT(S). INCOME MUST BE IDENTIFIED IN TERMS OF "GROSS ANNUAL".

NAME	RELATIONSHIP	AGE/SEX	ANNUAL INCOME	OFFICE USE	
				ACTUAL INCOME	LS
	Applicant	/			
		/			
		/			
		/			
		/			
		/			
		/			

INCOME INFORMATION

Gross family income would include income from any of the following sources or any other source of income. Wages, Self-Employment, Farming Income, Public Assistance, Social Security, Retirement Pensions, Veteran's or GI Benefits, Child/Spousal Support, Unemployment/Disability Insurance, Worker's Compensation, Contributions, Cash Gifts, Rental Income, Sale of Property, Foster Child Care, Interest, Dividends, Royalties, Scholarships, Grants and Loans for School.

PERSON RECEIVING INCOME	SOURCE OF INCOME	GROSS MONTHLY AMOUNT

CHECKING AND SAVINGS

Account Holder(s)	Name of Bank or Credit Union	Account No.	Type	Balance
			Ckg____ Svg____	
Account Holder(s)	Name of Bank or Credit Union	Account No.	Type	Balance
			Ckg____ Svg____	
Account Holder(s)	Name of Bank or Credit Union	Account No.	Type	Balance
			Ckg____ Svg____	

LIST OTHER ASSETS

Retirement funds/stocks/bonds, etc. (from attached checklist)

Family Member	Asset Description	Cash Value	Income From Assets

EMPLOYMENT				
APPLICANT		CO-APPLICANT		
Name and Address of Employer __Self-Employed		Name and Address of Employer __Self-Employed		
Position/Title/Type of Business Business phone		Position/Title/Type of Business Business phone		
Years on Job/Years employed in this line of work		Years on Job/Years employed in this line of work		
LIABILITIES				
List the creditor's name and account number for all outstanding debts, including but not limited to automobile loans, revolving charge accounts, alimony, child support, stock pledges, etc.				
Creditor Name	Account No.	Monthly payments	Payments Left	Approximate Balance
Total Liabilities		\$		\$
EXPLANATION OF INCOME SOURCE, ANNUAL AMOUNT OR OTHER COMMENTS				
ADDITIONAL INFORMATION				
List additional employment, assets or liabilities in the space provided below.				

CERTIFICATION--READ BEFORE SIGNING

I certify that this will be my primary residence of occupancy.

I certify that the information given on this form is true and accurate to the best of my knowledge. I certify that I have no additional income or assets and that there are no persons living in or contributing to my household other than those described here. I am aware that there are penalties for willfully and knowingly giving false information on an application for Federal or State funds. I understand that the information on this form is subject to verification. Penalties for falsifying information may include immediate repayment of all Federal or State funds received and/or prosecution under law.

Dated: ____/____/____ APPLICANT_____ CO-APPLICANT_____

City of Hollister Redevelopment Agency

Hollister Second Downpayment Assistance Program Application: Income Inclusions

Type of Income	YES or NO	Type	Received from whom?	Amount Received Annually
1 The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees tips, and bonuses, and other compensation for personal services.				
2 The net income from the operation of a business of profession. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight-line depreciation, as provided in Internal Revenue Services Regulations. Any withdrawal of cash or assets from the operation or business will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the family.				
3 Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used in determining net income. An allowance for depreciation is permitted only as authorized in number 2 (above). Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family.				
4 The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount.				
5 Payments in lieu of earnings, such as unemployment and disability compensation, and severance pay.				
6 Welfare assistance, Welfare assistance made under the Temporary Assistance for Needy Families (TANF 45 CFR 260.31)) program.				
7 Periodic and determinable allowances such as alimony and child support payments, and regular contributions or gift received organizations or from persons not residing in the dwelling.				
8 All regular pay, special pay, and allowances of a member of the Armed Forces.				
Subtotal Total:				

	Assets:	Source	Total Value of Asset	Interest Earned Annually	
1a	Cash held in savings accounts (current balance)				
1b	Cash held in checking accounts (avg. balance for last 6 mos.)				
1c	Cash held in safe deposit boxes				
1d	Other cash				
2	Cash value of revocable trusts available to the applicant.				
3	Equity in rental property or other capital investments.				
4	Cash value of stocks or bonds.				
5a	Cash value of Treasury bills, certificates of deposit and money market accounts.				
5b	Individual retirement, 401(K), and Keogh accounts (even though early withdrawal could result in a penalty).				
6	Retirement and pension funds.				
7	Cash value of life insurance policies available before death.				
8	Personal property held as an investment such as gems, jewelry, coin collections, antique cars, etc.				
9	Lump sum or one-time receipts, such as inheritances, capital gains, lottery winnings, victim's restitution, insurance settlements and other amounts not intended as periodic payments.				
10	Mortgages or deeds of trust held by applicant.				
Total Assets:					
Total Income (Subtotal + Assets):					

APPLICANT'S CERTIFICATION

I certify that all information on the Hollister Second Downpayment Assistance Program Application: Income Inclusions is true and correct to the best of my knowledge and I understand that any deliberate falsifications are grounds for rejection of the application. I consent to all verification of any information herein contained.

Applicant's Signature

Date

Co-Applicant's Signature

Date

Print Name

Print Name

City of Hollister Redevelopment Agency

Application for the Hollister Second Downpayment Assistance Program

Loan Terms & Feature Disclosure

I hereby acknowledge by initialing and signing below the terms and features of the City of Hollister Redevelopment Agency Hollister Second Downpayment Assistance Program. The following terms and features of the City of Hollister Second Downpayment Assistance Program are as follows:

Please initial below:

_____ Must meet the definition of a First-Time Homebuyer

_____ Must meet applicable Income Limits

_____ The loan term is forty-five (45) years

_____ This is a loan (not a grant) for Down Payment Assistance; however after forty-five (45) years the loan may be forgiven

_____ The interest rate is two-percent (2.00%) simple interest

_____ The loan payments are deferred (no monthly required payments) for forty-five (45) years

_____ A Resale Restriction Agreement will be recorded against the subject property for forty-five (45) years.

_____ The subject property must be located within the City of Hollister Redevelopment Agency Project Area

By signing below I understand the terms and features of the City of Hollister Redevelopment Agency Hollister Second Downpayment Assistance Program.

Applicant's Name

Co-Applicant's Name

Applicant's Signature

Co-Applicant's Signature

Date

Date

Return this form to
City of Hollister Redevelopment Agency
550 Monterey Street, Hollister, CA. 95023



City of Hollister Redevelopment Agency
Application for the Hollister Second Downpayment Assistance

Release of Information

To Whom It May Concern;

I / we the undersigned applicants are requesting a downpayment assistance loan from the Hollister Redevelopment Agency. You are hereby authorized to release to the Hollister Redevelopment Agency, or its agents, any information necessary for the purpose of processing my / our application. Such information includes but is not limited to:

Loan application:	Entire loan package including application forms, credit reports, disclosures and related information.
Income:	history, dates, title, income, hours, etc. from Employment and Non-Employment sources
Mortgage Loans:	loan balances, dates of loans, proposed financing, underwriting analysis, payment amount and payment history, etc.
Other:	any related matters such as, property appraisal, and title reports

Borrower(s) Privacy Act Notice: any information is to be used by the Hollister Redevelopment Agency, to determine whether you qualify for the downpayment assistance Loan. It will not be disclosed to any one except as required and permitted by law. You do not have to provide us with the information, but if you do not, your application for approval may be delayed or denied.

IMPORTANT

A scanned, carbon, emailed file / attachment, or facsimile copy of this authorization (bearing a valid copy of the signature/s of the undersigned) may be deemed to be the equivalent of and used as a duplicate original.

_____ Applicant	____/____/____ Date	____-____-____ Social Security Number
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_____ Applicant	____/____/____ Date	____-____-____ Social Security Number
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Return this form to
City of Hollister Redevelopment Agency
550 Monterey Street, Hollister, CA. 95023



City of Hollister Redevelopment Agency

Application for the Hollister Second Downpayment Assistance Program

CREDIT REPORT AUTHORIZATION AND PRIVACY DISCLOSURE FORM

I hereby authorize and instruct the Redevelopment Agency (hereinafter "Agency") to obtain and review my credit report. My credit report will be obtained from a credit report agency chosen by the Agency. I understand and agree that the Agency intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home.

My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to the Agency in connection with such evaluation. Authorization is further granted to the credit-reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

In addition, in connection with determining my ability to obtain a loan I

_____ Authorize,

_____ do not authorize,

the Agency to share with potential mortgage lenders my credit report and any information that I have provided, including any computations and assessments that have been produced based upon such information. These lenders may contact me to discuss loans for which I may be eligible.

I understand that I may revoke my consent to these disclosures by notifying the Agency in writing.

Applicant's Name

Co-Applicant's Name

Applicant's Signature

Co-Applicant's Signature

Social Security Number

Social Security Number

Date

Date

Return this form to
City of Hollister Redevelopment Agency
550 Monterey Street, Hollister, CA. 95023



City of Hollister Redevelopment Agency
Application for the Hollister Second Downpayment
Assistance

FAIR LENDING NOTICE

TO: ALL APPLICANTS FOR A LOAN FOR THE PURCHASE, CONSTRUCTION, REHABILITATION, IMPROVEMENT, OR REFINANCING OF A ONE-TO-FOUR FAMILY RESIDENCE.

UNDER THE HOUSING FINANCIAL DISCRIMINATION ACT OF 1977, IT IS UNLAWFUL FOR A FINANCIAL INSTITUTION TO REFUSE TO MAKE A LOAN OR TO OFFER LESS FAVORABLE TERMS THAN NORMAL (SUCH AS A HIGHER INTEREST RATE, LARGER DOWN PAYMENT, OR SHORTER MATURITY) BASED ON ANY OF THE FOLLOWING CONSIDERATIONS:

1. NEIGHBORHOOD CHARACTERISTICS (SUCH AS THE AVERAGE AGE OF THE HOMES OR THE INCOME LEVEL IN THE NEIGHBORHOOD) EXCEPT TO A LIMITED EXTENT NECESSARY TO AVOID AN UNSAFE AND UNSOUND BUSINESS PRACTICE.
2. RACE, SEX, COLOR, RELIGION, MARITAL STATUS, NATIONAL ORIGIN, OR ANCESTRY.

IT IS ALSO UNLAWFUL TO CONSIDER, IN APPRAISING A RESIDENCE THAT THE RACIAL, ETHNIC, OR RELIGIOUS COMPOSITION OF THE NEIGHBORHOOD IS UNDERGOING CHANGE OR IS EXPECTED TO UNDERGO CHANGE.

IF YOU WISH TO FILE A COMPLAINT, OR IF YOU HAVE ANY QUESTIONS ABOUT YOUR RIGHTS, CONTACT:

OFFICE OF THE COMPTROLLER OF THE CURRENCY (O.C.C.)
ATTENTION: CONSUMER COMPLAINT DEPARTMENT
50 FREMONT STREET, SUITE 3900
SAN FRANCISCO, CA 94105 (415) 545-5975

IF YOU FILE A COMPLAINT, THE LAW REQUIRES THAT YOU RECEIVE A DECISION WITHIN THIRTY (30) DAYS. I (WE) RECEIVED A COPY OF THIS NOTICE.

Applicant

Date

Co-Applicant

Date



CITY OF HOLLISTER REDEVELOPMENT AGENCY

Hollister Second Down Payment

Assistance Program (HSP)

FINANCIAL PRIVACY ACT NOTICE

This notice is required by the Rights to Financial Privacy Act of 1978 and the Gramm-Leach-Bliley Act of 1999 to inform you of the types of financial records that are kept on file by the Hollister Redevelopment Agency and which agencies or organizations have access to that information.

1. Purpose of Financial Record Keeping
Financial records are kept on file by the Hollister Redevelopment Agency for the purpose of documenting eligibility for various housing programs. These programs are administered by the Redevelopment Agency including First Time Homebuyer and Housing Rehabilitation Programs.
2. Financial Records Kept on File:
Loan Applications, Income Certifications, Federal Tax Returns, Income Verification from Employment, Verification of Benefits, Personal Credit Reports, Verification of Assets, Property Appraisals, Loan Payment Records and other such information relating to loan or housing program applications, eligibility determinations and/or loan servicing.
3. Agencies and Organizations with Right of Access to Financial Information Without Further Notice
 - A. Federal and State Agencies
U.S. Department of Housing and Urban Development
State Department of Housing and Community Development
 - B. Law Enforcement Agencies
 - C. Other Agencies or Organizations as required or permitted by law, or court order
4. Right of Access with Express Written Consent
Except as described above, your financial records may not be shared or released to private individuals, private businesses, or other entities without your express written consent.
5. Acknowledgement receipt of a copy of this Notice.

I/We acknowledge receipt of a copy of this Notice.

Applicant

Date

Co-Applicant

Date



2010 City of Hollister Redevelopment Agency
Hollister Second Down Payment Assistance Program (HSP)
Approved Lender List

FHA LOANS

<u>Lender/Broker Name:</u>	<u>Address (City, State & Zip):</u>	<u>Contact Person(s):</u>	<u>Contact Information</u>
Bank of America Home Loans	745 1 st Street Gilroy, California 95020	Jennifer N. Szyndrowski	408.846.7906 (Office) 408.687.0670 (Cell) Jennifer.szyndrowski@bankofamerica.com (E-mail)
Chase Home Loans	1177 1 st Street Gilroy, California 95020	Ann Lewis	408.842.3181 (Office) 408.422.6357 (Cell) Ann.x.lewis@chase.com (E-mail)
American Financial Network, Inc	330 Tres Pinos Road, Ste. F-3 Hollister, California 95023	Judy Azrie	831.636.3397 (Office) 831.801.8820 (Cell) jkrz@charter.net (E-mail)
Community West Mortgage	330 Tres Pinos Road, Ste. B-3 Hollister, California 95203	Catherine Kirk	831.634.2950 x 220 (Office) 831.801.5195 (Cell) cathy@mtgoffice.org (E-mail)
Kelly Mortgage and Realty, Inc.	149 Cinnamon Teal Alisa Viejo, California 92656	Rich Holstrom	877.535.2316 (Office) 541.659.9336 (Cell) rich@kellymortgageandrealty.com (E-mail)
Alterra Home Loans	1602 Grant Avenue, #208 Novato, California. 94945	Cary Baer	831.801.2504 (Cell); cbaer@goalterra.com (E-mail)

CONVENTIONAL & OTHER LOANS

<u>Lender/Broker Name:</u>	<u>Address (City, State & Zip):</u>	<u>Contact Person(s):</u>	<u>Contact Information</u>
Bank of America Home Loans	745 1 st Street Gilroy, California 95020	Jennifer N. Szyndrowski	408.846.7906 (Office) 408.687.0670 (Cell) Jennifer.szyndrowski@bankofamerica.com (E-mail)

Chase Home Loans	1177 1 st Street Gilroy, California 95020	Ann Lewis	408.842.3181 (Office) 408.422.6357 (Cell) Ann.x.lewis@chase.com (E-mail)
Wells Fargo Home Mortgage	455 San Benito Street Hollister, California 95023	Yvonne Claus-Bessa	831.630.2228 (Office) 831.801.6760 (Cell) Yvonne.m.clausbessa@wellsfargo.com (E-mail)
American Financial Network, Inc	330 Tres Pinos Road, Ste. F-3 Hollister, California 95023	Judy Azrie	831.636.3397 (Office) 831.801.8820 (Cell) jkrz@charter.net (E-mail)
Community West Mortgage	330 Tres Pinos Road, Ste. B-3 Hollister, California 95203	Catherine Kirk	831.634.2950 x 220 (Office) 831.801.5195 (Cell) cathy@mtgoffice.org (E-mail)
Kelly Mortgage and Realty, Inc.	149 Cinnamon Teal Alisa Viejo, California 92656	Rich Holstrom	877.535.2316 (Office) 541.659.9336 (Cell) rich@kellymortgageandrealty.com (E-mail)
Alterra Home Loans	1602 Grant Avenue, #208 Novato, California. 94945	Cary Baer	831.801.2504 (Cell); cbaer@goalterra.com (E-mail)